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Attorney for the Board of Dentistry

CERTIFIED TRUE COPY

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Deputy Attorney General  
(973) 693-5056

STATE OF NEW JERSEY  
DEPARTMENT OF LAW & PUBLIC SAFETY  
DIVISION OF CONSUMER AFFAIRS  
STATE BOARD OF DENTISTRY

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IN THE MATTER OF	:	
RICHARD RIVMAN, D.D.S.	:	Administrative Action
License No. 16621	:	
	:	CONSENT ORDER
LICENSED TO PRACTICE DENTISTRY :	:	
IN THE STATE OF NEW JERSEY :	:	

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This matter was opened to the New Jersey Board of Dentistry ("Board") upon receipt of a patient complaint alleging that Richard Rivman, D.D.S. ("respondent") failed to conform to standard dental practice in the State of New Jersey.

Specifically, it is alleged that respondent failed to provide adequate dental care due to poor treatment planning, loose-fitted fillings, incomplete treatment of gumline cavities and it appeared respondent failed to maintain accurate and complete patient and billing records in a manner consistent with the standard for such record keeping practices in New Jersey.

On March 15, 2000, respondent appeared with counsel, John Paul Dizzia, Esq., at an investigative inquiry into the matter held by the Board.

Having reviewed the entire record, including testimony of respondent at the investigative inquiry, it appears to the Board that respondent has engaged in repeated acts of negligence and has failed to maintain adequate patient and billing records.

These facts form the basis for disciplinary action pursuant to N.J.S.A. 45:1-21(d), (e) and N.J.A.C. 13:30-8.7(a)3,4,5. It appearing that respondent desires to resolve this matter and for good cause shown:

IT IS ON THIS /4<sup>th</sup> DAY OF November, 2001

**HEREBY ORDERED AND AGREED THAT:**

1. Respondent is hereby assessed a civil penalty, pursuant to N.J.S.A. 45:1-22, in the total amount of 2,000.00 comprised of \$1,500.00 for repeated acts of negligence and \$500.00 for poor record keeping. Payment of the civil penalty of \$2,000.00 shall be made by certified check or money order, payable to the State of New Jersey and forwarded to Kevin Earle, Executive Director, Board of Dentistry, P.O. Box 45005, Sixth Floor, 124 Halsey Street, Newark, New Jersey 07101 no later than thirty (30) days from the filing of this Consent Order. Subsequent violations will subject respondent to enhanced penalties pursuant to N.J.S.A. 45:1-25.

2. Respondent shall pay costs of the investigation in this matter in the amount of \$83.24. Payment for costs shall be made by

certified check or money order payable to the State of New Jersey and submitted to Kevin Earle, Executive Director, at the address above, no later than thirty (30) days from the entry of this Consent Order.

3. Respondent shall reimburse K.D. in the amount of \$1,375.00. A certified check or money order made payable to shall be sent within thirty (30) days of the entry date of this Consent Order to Kevin Earle, Executive Director, Board of Dentistry, at the address described in paragraph #1.

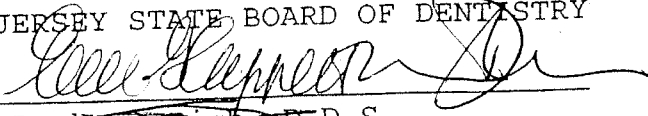
4. Failure to remit any payment as required by this Order will result in the filing of a Certificate of Debt.

5. Respondent shall successfully complete the following continuing education: Seven (7) hours in oral diagnosis and seven (7) hours in basic endodontics. These courses shall be completed within six (6) months of the entry of the within Consent Order. Further, these courses, which are in addition to the regularly required continuing education hours, shall be approved by the Board in writing prior to attendance. Respondent also shall be required to complete the attached continuing education Report and Proof of Attendance as proof of successful completion of the required course work. The attached forms are made a part of the within Consent Order, and a separate form is to be used for each course.

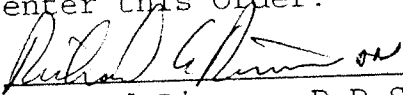
6. Failure to comply with the terms of this Consent Order may result in further disciplinary action.

NEW JERSEY STATE BOARD OF DENTISTRY

By:

  
~~Barbara Rich~~, D.D.S.  
President

I have read and understand  
this Consent Order and agree  
to be bound by its terms. Consent  
is hereby given to the Board to  
enter this Order.

  
Richard Rivman, D.D.S.

10/15/01  
Date

I consent to the form of this  
Consent Order.

\_\_\_\_\_  
John Paul Dizzia, Esq.

\_\_\_\_\_  
Date



State of New Jersey

DEPARTMENT OF LAW AND PUBLIC SAFETY  
DIVISION OF CONSUMER AFFAIRS  
STATE BOARD OF DENTISTRY  
124 HALSEY STREET, 6TH FLOOR, NEWARK NJ

CHRISTINE TODD WHITMAN  
Governor

JOHN J. FARMER, JR.  
Attorney General  
MARK S. HERR  
Director

Mailing Address:  
P.O. Box 45005  
Newark, NJ 07101  
(973) 504-6405

CONTINUING EDUCATION COURSE  
PRE-APPROVAL SHEET

ATTACH COURSE DESCRIPTION AND/OR BROCHURE AND SUBMIT AT LEAST 30  
DAYS PRIOR TO THE COURSE DATE. THE BOARD CANNOT ASSURE APPROVAL  
FOR COURSES PROVIDED ON SHORT NOTICE. A SEPARATE FORM IS TO BE USED  
FOR EACH COURSE. A COPY WILL BE RETURNED TO YOU AFTER APPROVAL OR  
DENIAL BY THE BOARD.

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DENTIST NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

TELEPHONE #: \_\_\_\_\_

\*\*\*\*\*  
NAME OF COURSE: \_\_\_\_\_

SPONSOR: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

TELEPHONE #: \_\_\_\_\_

\*\*\*\*\*  
\_\_\_\_\_ COURSE PRE-APPROVED BY BOARD      DATE \_\_\_\_\_

\_\_\_\_\_ COURSE NOT ACCEPTED BY BOARD      DATE \_\_\_\_\_

DATE \_\_\_\_\_

KEVIN B. EARLE  
EXECUTIVE DIRECTOR